(b) The primary objectives of the project, are to ensure high standards of quality, safety and efficacy of drugs; enhancing capacity and capability of laboratories in Central and State Sectors for both food and drug; Introduction of Good Manufacturing Practice (GMP) and Hazard Analysis Critical Control Point (HACC) for medium and small sector food processing industries, uniform enforcement capabilities for State Drugs and Food regulatory agencies, training of regulatory staff and industry personnel, consumer education and effective networking through computerization and monitoring, development of a system of continuous surveys of street food and domestic and imported food products, establishment of appopriate infrastructure for new drug approvals to meet global safety, efficacy and rationality standards and strengthened surveillance system for adverse drug events.

(c) The five year project became effective from October, 2003. Works has already been initiated on all the major components of the project *viz.* civil works, procurement of equipments and services, Training, Information, Education and Communication (IEC) and Computerization. A National Pharmacovigilance Programme has already been launched and the Indian Pharmacopoeia Commission set up under the Project.

Marketing of Medicines by its Generic Names

†2653. SHRI DILIP SINGH JUDEV: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are considering any proposal to remove the brand names of the drugs and marketing the drugs by their generic names so that the high prevailing prices of the drugs can be bought down;

(b) if so, the problems being faced in this regard;

(c) the maximum percentage difference in the prices of drugs being sold at brand name and in generic form; and

(d) the details of control machanism of permitting the maximum difference in the cost price and selling price of the drugs?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) There is no proposal under consideration to remove the brand names of drugs and

†Original notice of the question was received in Hindi.

market them by their generic names only. However, under the Drug and Cosmetics Rules, the proper name of the drug is required to be printed or written in a more conspicuous manner than the trade name (if any), which shall be shown immediately after or under the proper name.

(c) and (d) The prices of the drugs are controlled under the Drugs Price Control Order (DPCO) administered by the Ministry of Chemicals and Fertilizers and are not brand specific. The parameters for calculating the cost price and fixing of the maximum sale price of a drug are provided in the said order.

Anaemia in Children

2654. SHRIMATI VANGA GEETHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that 75 per cent Indian children are anaemic;

(b) if so, whether Government had surveyed in this regard in each State/UT;

(c) if so, the details Government have in this regard;

(d) whether it is a fact that at least 6.6 million newborns suffer from various deficiencies;

(e) if so, the reaction of Government thereto;

(f) the steps taken by Government to improve the situation;

(g) the funds allocated to each children hospital in each State/UT during the current Five Year Plan; and

(h) the funds utilized, so far?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (h) As per the National Family Welfare Survey-II, conducted in 24 States/UTs in the year 1998-99, 74.3% children under three years of age (6-35 months) were found to be anaemic.

The State-wise details of prevalence of Anaemia among children under 3 years of age is given at Statement (*See* below).